DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE PURI IC HEALTH REPVICE

GRANT APPLICATION

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YPE	PROGRAM	NUMBER	-		
EVIE	W GROUP	FORMERLY	-		
OUNC	L (Month, Year)	DATE RECEIVED	_		

						through	

1. TITLE OF PROPOSAL (Do not exceed 53 typewriter spaces)

Resource Related Research - Computers and Chemistry

(RR-00612 renewal)

2. PRINCIPAL INVESTIGATOR 3. DATES OF ENTIRE PROPOSED PROJECT PERIOD (This application 2A. NAME (Last, First, Initial) FROM THROUGH Lederberg, Joshua 5/1/74 4/30/77 28. TITLE OF POSITION TOTAL DIRECT COSTS RE-5. DIRECT COSTS REQUESTED QUESTED FOR PERIOD IN FOR FIRST 12-MONTH PERIC Professor and Chairman ITEM 3 \$1,639,456 \$488,267

2C. MAILING ADDRESS (Street, City, State, Zip Code)

Department of Genetics Stanford University Medical Center Stanford, California 94305

6. PERFORMANCE SITE(S) (See Instructions) Department of Genetics

Department of Chemistry, and Department of Computer Science Stanford University

2D. DEGRE	E	2E. SOC	2E. SOCIAL SECURITY NO.				
Ph.D.							
2F. TELE- PHONE DATA	Area Code 415	321-1200	NSION Ext. 5801				
(See Ins	tructions)	ERVICE, LABORAT f Genetics	TORY OR EQUIVALENT				
2H. MAJOR	SUBDIVIS	ION (See Instructio	ns)				

8. Inventions (Renewal Applicants Only - See Instructions) A. INO B. YES - Not previously reported C. YES - Previously reported

C. X YES - Pending Review Date TO BE COMPLETED BY RESPONSIBLE ADMINISTRATIVE AUTHORITY (Items 8 through 13 and 158)

9. APPLICANT ORGANIZATION(S) (See Instructions)

7. Research Involving Human Subjects (See Instructions)

Stanford University Stanford, California 94305 IRS No. 94-1156365 Congressional District No. 17

School of Medicine

A. NO B. YES Approved:

11. TYPE OF ORGANIZATION (Check applicable item)

FEDERAL STATE LOCAL COTHER (Specify) Private, non-profit University

NAME, TITLE, ADDRESS, AND TELEPHONE NUMBER OF OFFICIAL IN BUSINESS OFFICE WHO SHOULD ALSO BE NOTIFIED IF AN AWARD IS MADE

K. D. Creighton

Deputy Vice Pres. for Business and Finance Stanford University

Stanford, California 94305

10. NAME, TITLE, AND TELEPHONE NUMBER OF OFFICIAL(S) SIGNING FOR APPLICANT ORGANIZATION(S)

Telephone Number (415) 321-2300 X2_ 3. IDENTIFY ORGANIZATIONAL COMPONENT TO RECEIVE CREDIT FOR INSTITUTIONAL GRANT PURPOSES (See Instructions)

01 School of Medicine

c/o Sponsored Projects Office Telephone Number (s) (415) 321-2300

ENTITY NUMBER (Formerly PHS Account Number) 458210

15. CERTIFICATION AND ACCEPTANCE. We, the undersigned, cartify that the statements herein are true and complete to the best of our knowledge and accept, as to any grant awarded, the obligation to comply with Public Health Service terms and conditions in affect at the time of the award.

SIGNATURES (Signatures required on original copy only.
Use ink, "Per" signatures not acceptable)

SIGNATURE OF PERSON NAMED IN ITEM 2A SIGNATURE(S) OF PERSON(S) NAMED U

APR 26 1973

DATE

SECTION 1

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE PUBLIC HEALTH SERVICE

PROJECT NUMBER

LEAVE BLANK

RESEARCH OBJECTIVES

NAME AND ADDRESS OF APPLICANT ORGANIZATION

Stanford University, Stanford, California 94305

NAME, SOCIAL SECURITY NUMBER, OFFICIAL TITLE, AND DEPARTMENT OF ALL PROFESSIONAL PERSONNEL ENGAGED ON PROJECT, BEGINNING WITH PRINCIPAL INVESTIGATOR

Lederberg, Joshua,
Djerassi, Carl,
Feigenbaum, Edward,
Buchanan, Bruce,
Duffield, Alan,
Pereira, Wilfred,
Rindfleisch, Thomas
Smith, Dennis,
Sridharan, Natesa,
Hammerum, Steen
TITLE OF PROJECT

Professor of Genetics, Department of Genetics
Professor of Chemistry, Department of Chemistry
Professor of Computer Science, Dept. of Computer Sciences
Research Computer Scientist, Dept. of Computer Sciences
Research Associate, Department of Genetics
Research Associate, Department of Genetics
Research Associate, Department of Chemistry
Research Associate, Department of Computer Science
Research Associate, Department of Chemistry

Resource Related Research - Computers and Chemistry

USE THIS SPACE TO ABSTRACT YOUR PROPOSED RESEARCH, OUTLINE OBJECTIVES AND METHODS. UNDERSCORE THE KEY WO (NOT TO EXCEED 10) IN YOUR ABSTRACT.

The objectives of this research program are the development of innovative computer and biochemical analysis techniques for application in medical research and closely related aspects of investigative patient care. We will apply the unique analytical capabilities of gas chromatography/mass spectrometry (GC/MS) and Carbon(13) Nuclear Magnetic Resonance Spectrometry (CMR) with the assistance of data interpreting computer programs utilizing artificial intelligence techniques, to investigate the chemical constituents of human body fluids in a variety of clinical contexts. Specific subtasks of this program include; 1) the application of artificial intelligence techniques to programs capable of interpreting mass spectra from basic principles as well as extending mass spectral theory by analysis of solved spectrumstructure examples, 2) the extension of GC/MS data systems incorporating an increasing level of automation and allowing the directed collection of specialized information, 3) the application of GC/MS techniques to analyze body fluids such as urine and blood, and to relate detected metabolic abnormalities to clinically observable disease states, and 4) the application of CMR techniques to assist in the determination of chemical structure.

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The undersigned agrees to accept responsibility for the scientific and technical conduct of this project and for provision of required progress reports if a grant is awarded as the result of this application.

APR 26 1373

Date

Joshua Lederber

Principal Investigator

RESOURCE-RELATED RESEARCH: COMPUTERS AND CHEMISTRY (RR-00612 - Renewal Application)

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